2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000096959

Entity Name: HUMIDORS PLUS, INC.

FILED Jul 07, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3307 NW 108TH DR CORAL SPRINGS, FL 33065

Current Mailing Address: New Mailing Address:

3307 NW 108TH DR 768 RIVERSIDE DR.

CORAL SPRINGS, FL 33065 CORAL SPRINGS, FL 33071

FEI Number: 52-2380330 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HOCHMAN, ANDREW PSTD 3307 NW 108 DRIVE 768 RIVERSIDE DR.

CORAL SPRINGS, FL 33065 US CORAL SPRINGS, FL 33071 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ANDREW HOCHMAN 07/07/2004

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD () Delete Title: **PSTD** (X) Change () Addition HOCHMAN, ANDREW Name: Name: HOCHMAN, ANDREW 3307 NW 108 DRIVE 768 RIVERSIDE DR. Address: Address: CORAL SPRINGS, FL 33071 City-St-Zip: CORAL SPRINGS, FL 33065 City-St-Zip:

Title: VP () Delete Title: VP (X) Change () Addition

 Name:
 HOCHMAN, SHANNON
 Name:
 HOCHMAN, SHANNON

 Address:
 3307 NW 108TH DRE
 Address:
 768 RIVERSIDE DR.

 City-St-Zip:
 CORAL SPRINGS, FL 33065
 City-St-Zip:
 CORAL SPRINGS, FL 33071

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANDREW HOCHMAN PSTD 07/07/2004